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ADOLESCENT SUBSTANCE ABUSE

Adolescent substance abuse is a major public health problem in the U.S. today. Among Americans using alcohol or illicit drugs, the adolescent population is more at risk of becoming dependent than any other age group. Consequently prevention becomes an important factor in reducing adolescent substance abuse. Determining preventive measures involves the identification of various risk factors associated with substance abuse. Thus far, a range of individual, family, social, environmental and other risk factors have been identified. Successful prevention efforts seek to reduce them and promote healthy behaviors.

The HHS Secretary's Youth Substance Abuse Prevention Initiative (YSAPI) was created in response to the increase of substance abuse by adolescents aged 12-17. It is guided by the goal to educate and enable American adolescents to reject illicit drugs and underage use of alcohol and tobacco. Within this broad goal, YSAPI has established 3 specific goals: (1) by the end of 2002, decrease the past month's use of marijuana among 12-17 year olds by 20%; (2) decrease the use of all illicit drugs by 20%; (3) decrease the use of alcohol by 10%. SAMHSA has been designated at the lead agency for YSAPI. It is responsible for coordinating HHS programs and collaborating with other organizations to achieve progress toward the stated goals.

1. **ADOLESCENT RISK TAKING AND SELF-REPORTED INJURIES ASSOCIATED WITH SUBSTANCE USE.**
Spirito, A. *Am J Drug Alcohol Abuse* 26 (1):113-23, '00.

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2. ASSOCIATIONS OF FAMILY ENVIRONMENT AND INDIVIDUAL FACTORS WITH TOBACCO, ALCOHOL AND ILLICIT DRUG USE IN ADOLESCENTS. Challier, B. *Eur J Epidemiol* 16 (1):33-42, '00.
3. CAUSES AND CORRELATES OF ADOLESCENT DRUG ABUSE AND IMPLICATIONS FOR TREATMENT. Spooner, C. *Drug Alcohol Rev* 18:453-85, Dec '99.
4. DEMOGRAPHIC, INDIVIDUAL, AND INTERPERSONAL PREDICTORS OF ADOLESCENT ALCOHOL AND MARIJUANA USE FOLLOWING TREATMENT. Latimer, WW. *Psychol Addict Behav* 14:162-73, June '00.
5. GROUP SELF-IDENTIFICATION AS A PROSPECTIVE PREDICTOR OF DRUG USE AND VIOLENCE IN HIGH-RISK YOUTH. Sussman, S. *Psychol Addict Behav* 14:192-6, June '00.
6. IDENTIFYING ADOLESCENTS AT RISK FOR HARD DRUG USE: RACIAL/ETHNIC VARIATIONS. *J Adolesc Health* 25:382-95, Dec '99.
7. NEUROCOGNITIVE FUNCTIONING OF ADOLESCENTS: EFFECTS OF PROTRACTED ALCOHOL USE. Brown, SA. *Alcohol Clin Exp Res* 24:164-71, Feb '00.
8. RELIABILITIES OF SHORT SUBSTANCE ABUSE SCREENING TESTS AMONG ADOLESCENT MEDICAL PATIENTS. Knight, JR. *Pediatrics* 105:948-53, Apr '00.
9. TREATING ADOLESCENTS WITH SUBSTANCE USE DISORDERS: AN OVERVIEW OF PRACTICE ISSUES AND TREATMENT OUTCOME. Winters, KC. *Subst Abuse* 20:203-25, Dec '99.
10. VARIABLES ASSOCIATED WITH ADOLESCENT ALCOHOL USE: A MULTIETHNIC COMPARISON. Parker, KD. *J Soc Psychol* 140:51-62, Feb '00.

CHILD ABUSE REPORTING

Child abuse is defined as the physical, emotional or sexual abuse of children under the age of 18 by parents, relatives or caretakers. The literature indicates that 3,195,000 cases of suspected child abuse were reported in 1997, with 1,054,000 cases substantiated. Of that number, 54% were due to neglect, 22% due to physical abuse, 8% from sexual abuse, 4% from emotional maltreatment, and 12% from other causes. Research indicates that primary care providers report most but not all of the cases suspected of child abuse to child protective services (CPS). Uncertainty about the

diagnosis of abuse, past negative experiences with CPS, and perceived lack of benefit to the child are reasons for not reporting all cases. AHRQ has recently funded a study on the reporting of suspected child abuse cases by primary care providers.

11. ACCURATE ASCERTAINMENT OF CHILD-ABUSE MORTALITY. *JAMA* 283:337-8, 19 Jan '00.
12. CHILD ABUSE AND DOMESTIC VIOLENCE IN FAMILIES OF CHILDREN SEEN FOR SUSPECTED SEXUAL ABUSE. Bowen, K. *Clin Pediatr* 39:33-40, Jan '00.
13. CHILD ABUSE AND UNINTENTIONAL INJURIES. DiScala, C. *Arch Pediatr Adolesc Med* 154:16-22, Jan '00.
14. CHILD ABUSE—CONTROVERSIES AND IMPOSTERS. Block, RW. *Curr Probl Pediatr* 29:253-72, Oct '99.
15. ELIMINATING INSTITUTIONAL CHILD ABUSE. Percy, AK. *Neurology* 53:1617-21, Nov '99.
16. CHILD ABUSE REPORTING IN SOUTH DAKOTA AND THE NON-PRIMARY CARE PROVIDER. *South Dakota J Med* 52:417-9, Nov '99.
17. CORROBORATION IS IMPORTANT WHEN CHILDREN'S ILLNESSES ARE DIAGNOSED. Pheby, D. *BMJ* 320:1004, 8 Apr '00.
18. HEALTH CARE PROVIDERS' EXPERIENCE REPORTING CHILD ABUSE IN THE PRIMARY CARE SETTING. Flaherty, EG. *Arch Pediatr Adolesc Med* 154:489-93, May '00.
19. INQUIRY SHOULD BE HELD INTO DOCTORS INVOLVED IN CHILD ABUSE INVESTIGATIONS. Henshall, C. *BMJ* 320:1004, 8 Apr '00.
20. PRIMARY CARE PROVIDERS REPORT MOST BUT NOT ALL CASES OF SUSPECTED CHILD ABUSE. *AHRQ Res Activities* 240:7, Aug '00.

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Chronic obstructive pulmonary disease (COPD) is a progressive disease of the lungs caused by blockage of the airway sufficient to impair ventilation. The literature indicates that the most common form of COPD is a combination of emphysema and chronic bronchitis. COPD is the fourth leading cause of death in the U.S. among men and women. Although there is no cure for this disease, it may be potentially reversible. One of the factors contributing to increased incidence of COPD is tobacco smoking (cigarettes, pipe, cigars). Research indicates that COPD

affects as many as 15 million people in the U.S., causing 110,000 deaths annually. NCHS has current data on COPD in the annual report *Health, United States, 2000*.

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| <p>21. CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Barnes, PJ. <i>N Engl J Med</i> 343:269-79, 27 July '00.</p> | <p>26. NEW TREATMENTS PROPOSED FOR CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Melton, L. <i>Lancet</i> 355:472, 5 Feb '00.</p> |
| <p>22. CHRONIC OBSTRUCTIVE PULMONARY DISEASE. <i>Mayo Clin Health Lett</i> Suppl: entire issue Feb '00.</p> | <p>27. PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE ARE AT INCREASED RISK OF DEATH ASSOCIATED WITH URBAN PARTICLE AIR POLLUTION: A CASE-CROSSOVER ANALYSIS. Sunyer, J. <i>Am J Epidemiol</i> 151:50-6, 1 Jan '00.</p> |
| <p>23. INFLUENCE OF ATTENTION AND JUDGMENT ON PERCEPTION OF BREATHLESSNESS IN HEALTHY INDIVIDUALS AND PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Meek, PM. <i>Nurs Res</i> 49:11-9, Jan-Feb '00.</p> | <p>28. PHYSICAL AND PSYCHOLOGICAL CORRELATES OF FUNCTIONING IN PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Scharloo, M. <i>J Asthma</i> 37:17-29, Feb '00.</p> |
| <p>24. LIVING AND DYING WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Lynn, J. <i>J Am Geriatr Soc</i> 48:S91-S100, May '00.</p> | <p>29. REHABILITATION OF PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE. EXERCISE TWICE A WEEK IS NOT SUFFICIENT! Ringbaek, TJ. <i>Resp Med</i> 94:150-4, Feb '00.</p> |
| <p>25. MANAGEMENT OF DYSPNEA IN SEVERE CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Janssens, JP. <i>J Pain Symptom Manage</i> 19:378-92, May '00.</p> | <p>30. SMOKING AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Sethi, JM. <i>Clin Chest Med</i> 21:67-86, Mar '00.</p> |

FAMILY-FOCUSED SUBSTANCE ABUSE PREVENTION PROGRAMS

The strongest pathway protecting youth from drug use involves positive family relations. Biological parents, step-parents, adoptive parents, foster parents, extended family and other combinations of family members all fall under the definition of "family". The literature indicates

that three family-focused approaches have the highest level of effectiveness in reducing substance abuse problems in youth: parent and family skills training, family in-home support, and family therapy. Research indicates that the family plays a key role in influencing how children handle the temptations of alcohol and illicit drugs. SAMHSA has awarded \$3 million in family-strengthening grants to 32 research-based parenting and family support service programs focused on reducing substance abuse.

31. THE COMMUNITY-REINFORCEMENT APPROACH. Miller, WR. *Alcohol Res Health* 23 (2):116-21, '99.
32. DISRUPTIVE BEHAVIOR DISORDERS AND SUBSTANCE USE DISORDERS IN ADOLESCENTS. Bukstein, OG. *J Psychoactive Drugs* 32:67-79, Jan-Mar '00.
33. ENGAGING THE UNMOTIVATED IN TREATMENT FOR ALCOHOL PROBLEMS: A COMPARISON OF THREE STRATEGIES FOR INTERVENTION THROUGH FAMILY MEMBERS. Miller, WR. *J Consult Clin Psychol* 67:688-97, Oct '99.
34. EVALUATION OF A FAMILY-BASED SUBSTANCE ABUSE PREVENTION PROGRAM TARGETED FOR THE MIDDLE SCHOOL YEARS. Abbey, A. *J Drug Educ* 30 (2):213-28, '00.
35. FAMILY RISK FACTORS VERSUS PEER RISK FACTORS FOR DRUG ABUSE: A LONGITUDINAL STUDY OF AN AFRICAN AMERICAN URBAN COMMUNITY SAMPLE. Friedman, AS. *J Subst Abuse Treat* 18:267-75, Apr '00.
36. IN SEARCH OF A NEW METAPHOR FOR THE IMPACT OF DRUG ABUSE ON FAMILIES. Cavaola, AA. *Fam Therapy* 27 (2):81-7, '00.
37. MANAGEMENT OF NEGATIVE SYMPTOMS AMONG PATIENTS WITH SCHIZOPHRENIA ATTENDING MULTIPLE-FAMILY GROUPS. Dyack, DG. *Psychiatr Serv* 51:513-9, Apr '00.
38. PSYCHOSOCIAL APPROACHES TO DUAL DIAGNOSIS. Drake, RE. *Schizophr Bull* 26 (1):105-18, '00.
39. THEORY DEVELOPMENT IN A FAMILY-BASED THERAPY FOR ADOLESCENT DRUG ABUSE. Liddle, HA. *J Clin Child Psychol* 28:521-32, Dec '99.

40. UNDERSTANDING GENDER DIFFERENCES IN ADOLESCENT DRUG ABUSE: ISSUES OF COMORBIDITY AND FAMILY FUNCTIONING. Dakof, GA. *J Psychoactive Drugs* 32:25-32, Jan-Mar '00.

GENDER DIFFERENCES IN MENTAL ILLNESS

Men and women are at differential risk for a number of mental illnesses. The literature indicates that there is a greater prevalence of depression, eating disorders, and anxiety disorders among women whereas antisocial personality disorders and substance abuse occur more frequently in men. In addition, women are more likely than age-matched men to develop posttraumatic stress disorder in response to a traumatic event. Research indicates that biological and environmental factors are being studied to see how they affect gender differences in mental illness. NIMH is currently funding studies on gender differences in depression.

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| <ol style="list-style-type: none">41. ADOLESCENT ONSET OF THE GENDER DIFFERENCE IN LIFETIME RATES OF MAJOR DEPRESSION. Cyranowski, JM. <i>Arch Gen Psychiatry</i> 57:21-7, Jan '00.42. AGE AT ONSET OF SCHIZOPHRENIA: GENDER DIFFERENCES AND INFLUENCE OF TEMPORAL SOCIOECONOMIC CHANGE. Takahashi, S. <i>Psychiatry Clin Neurosci</i> 54 (2):153-6, '00.43. ANGER AND DEPRESSION IN GIRLS AND BOYS. Cox, DL. <i>Psychol Women Q</i> 24 (1):110-2, '00. | <ol style="list-style-type: none">44. GENDER DIFFERENCES IN CHRONIC MAJOR AND DOUBLE DEPRESSION. Kornstein, SG. <i>J Affect Disord</i> 60:1-11, Oct '00.45. GENDER DIFFERENCES IN DEPRESSION AND ANTIDEPRESSANT PHARMACOKINETICS AND ADVERSE EVENTS. Frackiewicz, EJ. <i>Ann Pharmacother</i> 34:80-8, Jan '00.46. GENDER DIFFERENCES IN PSYCHIATRIC MORBIDITY AMONG FAMILY CAREGIVERS: A REVIEW AND ANALYSIS. Yee, JL. <i>Gerontologist</i> 40:147-64, Apr '00. |
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47. GENDER DIFFERENCES IN SOCIAL AND INTERPERSONAL FEATURES AND PERSONALITY DISORDERS AMONG JAPANESE PATIENTS WITH OBSESSIVE-COMPULSIVE DISORDER. Matsunaga, H. *Compr Psychiatry* 41:266-72, July-Aug '00.
48. GENDER DIFFERENCES IN THE ASSOCIATIONS BETWEEN POSTTRAUMATIC STRESS SYMPTOMS AND PROBLEMATIC SUBSTANCE USE IN PSYCHIATRIC INPATIENT ADOLESCENTS. Lipschitz, DS. *J Nerv Ment Dis* 188:349-56, '00.
49. GENDER DIFFERENCES IN TREATMENT RESPONSE TO SERTRALINE VERSUS IMIPRAMINE IN CHRONIC DEPRESSION. Kornstein, SG. *Am J Psychiatry* 157:1445-52, Sep '00.
50. SEXIST DISCRIMINATION MAY ACCOUNT FOR WELL-KNOWN GENDER DIFFERENCES IN PSYCHIATRIC SYMPTOMS. Klonoff, EA. *Psychol Women Q* 24 (1):93-9, '00.

PHYSICIAN SUPPLY IN RURAL COMMUNITIES

The shortage of physicians in rural areas is a serious problem for national and state policymakers who are challenged to find effective ways to increase the supply. The literature suggests that maldistribution with regard to practice speciality and location hinders access to medical care for rural communities. Research indicates that residents whose medical training occurs in rural areas and emphasizes services necessary for rural practice are more likely to establish practice in rural areas. The Rural Health Research Centers Program, HRSA, is currently studying the critical issues facing rural communities in their quest to secure adequate, affordable, high quality health services.

51. THE AVAILABILITY AND DISTRIBUTION OF DENTISTS IN RURAL ZIP CODES AND PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS (PC-HPSA) ZIP CODES: COMPARISON WITH PRIMARY CARE PROVIDERS. Knapp, KK. *J Public Health Dent* 60:43-8, Win '00.
52. THE CASE FOR MORE U.S. MEDICAL STUDENTS. Mullan, F. *N Engl J Med* 343:213-7, 20 July '00.

53. COMPETITIVE BEHAVIOR IN LOCAL PHYSICIAN MARKETS. Brasure, M. *Med Care Res Rev* 56:395-414, Dec '99.
54. THE DISTRIBUTION OF RURAL FEMALE GENERALIST PHYSICIANS IN THE UNITED STATES. Doescher, MP. *J Rural Health* 16:111-8, Spr '00.
55. THE EFFECT OF ACCREDITED RURAL TRAINING TRACKS ON PHYSICIAN PLACEMENT. *Am Fam Physician* 62:22, 1 July '00.
56. ILLINOIS RMED: A COMPREHENSIVE PROGRAM TO IMPROVE THE SUPPLY OF RURAL FAMILY PHYSICIANS. Stearns, JA. *Fam Med* 32:17-21, Jan '00.
57. MEDICARE GRADUATE MEDICAL EDUCATION FUNDING AND RURAL HOSPITALS. Slifkin, RT. *J Health Care Poor Underserved* 11:231-42, May '00.
58. PERCEPTIONS OF PRACTICE AMONG RURAL FAMILY PHYSICIANS—IS THERE A GENDER DIFFERENCE? Spenny, ML. *J Am Board Fam Pract* 13:183-7, May-June '00.
59. A SURVEY OF BURNOUT AMONG MENTAL HEALTH CENTER DIRECTORS IN A RURAL STATE. Rohland, BM. *Admin Policy Ment Health* 27:221-37, Mar '00.
60. USING THE AMERICAN MEDICAL ASSOCIATION PHYSICIAN MASTERFILE TO MEASURE PHYSICIAN SUPPLY IN SMALL TOWNS. Konrad, TR. *J Rural Health* 16:162-7, Spr '00.

REINVENTING GOVERNMENT

Since 1990, the management staff of the Parklawn Health Library has selected 10 journal articles per month on innovative management techniques to appear in each Bulletin. First entitled "Total Quality Management," this recurring bibliography was renamed "Reinventing Government" to reflect and support the Administration's efforts to create a government that works better and costs less.

61. APOLLO 11: AN EXPERIENTIAL MODEL FOR TEAM-BASED TRANSFORMATIONAL CHANGE. Townes, PG. *J Healthc Qual* 22:23-8, Sep-Oct '00.
62. CUTTING YOUR LOSSES: EXTRICATING YOUR ORGANIZATION WHEN A BIG PROJECT GOES AWRY. Keil, M. *Sloan Manage Rev* 41:55-68, Spr '00.

63. EXAMINING EMPIRICAL EVIDENCE ON DIVERSITY EFFECTS: HOW USEFUL IS DIVERSITY RESEARCH FOR PUBLIC-SECTOR MANAGERS? Wise, LR. *Public Admin Rev* 60:386-94, Sep-Oct '00.
64. HUSTLE, THAT'S ALL. Dagestino, K. *Qual Progress* 33:73-9, Sep '00.
65. INSTITUTING ORGANIZATIONAL LEARNING FOR QUALITY IMPROVEMENT THROUGH STRATEGIC PLANNING NOMINAL GROUP PROCESSES. White, DB. *J Healthc Qual* 22:13-8, Sep-Oct '00.
66. LOOKING FOR QUALITY ROLE MODELS IN INDIVIDUALS, ORGANIZATIONS. Watson, GH. *Qual Progress* 33:16, Sep '00.
67. THE SILENT KILLERS OF STRATEGY IMPLEMENTATION AND LEARNING. Beer, M. *Sloan Manage Rev* 41:29-40, Sum '00.
68. TECHNOLOGY IS NOT ENOUGH: IMPROVING PERFORMANCE BY BUILDING ORGANIZATIONAL MEMORY. Cross, R. *Sloan Manage Rev* 41:69-78, Spr '00.
69. A TWENTY-FIRST CENTURY RECEPTION FOR DIVERSITY IN THE PUBLIC SECTOR: A CASE STUDY. Soni, V. *Public Admin Rev* 60:395-408, Sep-Oct '00.
70. WHY SHOULD ANYONE BE LED BY YOU? Goffee, R. *Harv Bus Rev* 78:63-9, Sep-Oct '00.

SELECTED NEW ACQUISITIONS

To permit review of all books and reports in this list, they will not be circulated until three weeks from the date of this Bulletin. All materials are available for review on the NEW BOOKS display shelf near the Service Desk of the Library. You may reserve any book simply by completing the yellow strip form available on the display shelf.

DRUG ABUSE

WM ADDICTION IS A CHOICE.
270 Schaler, Jeffrey A. Chicago,
S297 IL, Open Court, 2000, 179 p.

WM THE ADDICTION-PRONE
270 PERSONALITY. New York,
A224366 NY, Kluwer Academic
 /Plenum Publishers, 2000,
 320 p.

WM DRUG TREATMENT
171 ISSUES IN DEPRESSION.
D8427 Philadelphia, PA, Adis
 International, 2000, 218 p.

WA ESSENTIAL PUBLIC
100 HEALTH. 2nd ed.
D7145 Donaldson, L.J. Berkshire,
 [ENG], Petroc Press, 2000,
 477 p.

HEALTH PLANNING

WC HIV/AIDS PREVENTION:
503.6 CURRENT ISSUES IN
H6411 COMMUNITY PRACTICE.
 New York, NY, Haworth
 Press, 2000, 82 p.

W HANDBOOK OF GENDER,
84.1 CULTURE, AND HEALTH.
H19125 Mahwah, NJ, Lawrence
 Erlbaum Associates, 2000,
 531 p.

W HEALTH DATA QUEST:
26.5 HOW TO FIND AND USE
H34975 DATA FOR
 PERFORMANCE
 IMPROVEMENT. San
 Francisco, CA, Jossey-Bass,
 2000, 230 p.

W INSTITUTIONAL CHANGE
84AC2 AND HEALTHCARE
I59 ORGANIZATIONS: FROM
 PROFESSIONAL
 DOMINANCE TO
 MANAGED CARE. Chicago,
 IL, University of Chicago
 Press, 2000, 427 p.

WX AN INTRODUCTION TO
150 HEALTHCARE
H1466 ORGANIZATIONAL
 ETHICS. Hall, Robert T.
 New York, NY, Oxford
 University Press, 2000,
 265 p.

W
84AA1
S737
LICENSE TO STEAL: HOW
FRAUD BLEEDS
AMERICA'S HEALTH
CARE SYSTEM. Sparrow,
Malcolm K. Boulder, CO.
Westview Press, 2000, 283 p.

W
130AA1
M311523
THE MANAGED HEALTH
CARE HANDBOOK. 4th ed.
Gaithersburg, MD, Aspen
Publishers, 2001, 1408 p.

WA
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N2137
THE NATION'S HEALTH.
6th ed. Sudbury, MA, Jones
and Bartlett, 2001, 573 p.

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R2814
REMAKING HEALTH
CARE IN AMERICA: THE
EVOLUTION OF
ORGANIZED DELIVERY
SYSTEMS. 2nd ed. San
Francisco, CA, Jossey-Bass,
2000, 338 p.

WC
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L569
STATE GOVERNMENT
PROVISION OF HIV/AIDS
PREVENTION
PROGRAMS: TOWARDS A
PARTNERSHIP MODEL OF
THE CONTRACTUAL
RELATIONSHIP
BETWEEN STATE
GOVERNMENTS AND
COMMUNITY AGENCIES.
Letona, Maria Elena. New
York, NY, Garland
Publishing, 2000, 267 p.

WA
590
T136
TAILORING HEALTH
MESSAGES:
CUSTOMIZING
COMMUNICATION WITH
COMPUTER
TECHNOLOGY. Mahwah,
NJ, Lawrence Erlbaum
Associates, 2000, 270 p.

WM
30
T64
TOTAL QUALITY
MANAGEMENT IN
MENTAL HEALTH AND
MENTAL RETARDATION.
Washington, DC, American
Association on Mental
Retardation, 2000, 64 p.

MANAGEMENT

HM
851
S5794
FAST FORWARD:
AMERICA'S LEADING
EXPERTS REVEAL HOW
THE INTERNET IS
CHANGING YOUR LIFE.
Sikes, Alfred C. New York,
NY, William Morrow, 2000,
298 p.

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6054.3
G135
GOING TO THE TOP: A
ROAD MAP FOR SUCCESS
FROM AMERICA'S
LEADING WOMEN
EXECUTIVES. Gallagher,
Carol. New York, NY,
Viking, 2000, 308 p.

HD
62.37
G5845 THE HUMAN SIDE OF
HIGH-TECH: LESSONS
FROM THE
TECHNOLOGY
FRONTIER. Goman, Carol
Kinsey. New York, NY,
Wiley, 2000, 230 p.

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26.5
M5275 THE IMPACT OF
INFORMATION
TECHNOLOGY:
EVIDENCE FROM THE
HEALTHCARE
INDUSTRY. Menon, Nirup
M. New York, NY, Garland
Publishing, 2000, 105 p.

MEDICAL & ALLIED SCIENCES

WS
200
E933 EVIDENCE BASED
PEDIATRICS AND CHILD
HEALTH. London, ENG,
BMJ Books, 2000, 384 p.

QZ
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F9255 FROM CHANCE TO
CHOICE: GENETICS AND
JUSTICE. New York, NY,
Cambridge University Press,
2000, 398 p.

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C669 FROM CHAOS TO
COERCION: DETENTION
AND THE CONTROL OF
TUBERCULOSIS. Coker,
Richard J. New York, NY,
St. Martin's Press, 2000,
261 p.

WB
428
M614 HANDBOOK OF DAIRY
FOODS AND NUTRITION.
2nd ed. Miller, Gregory D.
Boca Raton, FL, CRC Press,
2000, 423 p.

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H7825 HORMONE THERAPY
AND THE BRAIN: A
CLINICAL PERSPECTIVE
ON THE ROLE OF
ESTROGEN. Henderson,
Victor W. New York, NY,
Parthenon Publishing Group,
2000, 112 p.

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K1414 THE LIMITS AND LIES OF
HUMAN GENETIC
RESEARCH: DANGERS
FOR SOCIAL POLICY.
Kaplan, Jonathan Michael.
New York, NY, Routledge,
2000, 224 p.

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T3954 PANDORA'S POISON:
CHLORINE, HEALTH,
AND A NEW
ENVIRONMENTAL
STRATEGY. Thornton, Joe.
Cambridge, MA, MIT Press,
2000, 599 p.

WL
102.8
P3987 PEPTIDE RECEPTORS.
New York, NY, Elsevier,
2000, volume 16 pt.1, 517 p.

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P569 THE PHYSICIAN'S GUIDE
TO CARING FOR
CHILDREN WITH
DISABILITIES AND
CHRONIC CONDITIONS.
Baltimore, MD, P.H.
Brookes, 2000, 676 p.

WS
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C43611 CHILD AND
ADOLESCENT THERAPY:
COGNITIVE-
BEHAVIORAL
PROCEDURES. 2nd ed.
New York, NY, Guildford
Press, 2000, 432 p.

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S63211 SLEEP AND BREATHING
IN CHILDREN: A
DEVELOPMENTAL
APPROACH. New York,
NY, Marcel Dekker, Inc.,
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HV
6626.5
C43792 CHILDREN EXPOSED TO
DOMESTIC VIOLENCE.
New York, NY, Haworth
Maltreatment & Trauma
Press, 2000, 373 p.

WC
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T8714 TUSKEGEE'S TRUTHS:
RETHINKING THE
TUSKEGEE SYPHILIS
STUDY. Chapel Hill, NC,
University of North Carolina
Press, 2000, 630 p.

WM
430.5.F2
S398 FAMILY FUNCTIONING:
THE GENERAL LIVING
SYSTEMS RESEARCH
MODEL. Schwab, John J.
New York, NY, Kluwer
Academic/Plenum Publishers,
2000, 283 p.

QU
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V8315 VITAMINS AND
HORMONES. New York,
NY, Academic Press, 2000,
volume 58, 505 p.

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G918677 GROUP THERAPY IN
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PRACTICE. New York, NY,
Haworth Press, 2000, 93 p.

MENTAL HEALTH

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G564 ATTACHMENT AND
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Goldberg, Susan. New York,
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SEXUALLY ABUSED
CHILDREN: A
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Grotsky, Lynn. Thousand
Oaks, CA, Sage Publications,
2000, 313 p.

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Diego, CA, Academic Press,
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GUIDE TO LIBRARY RESOURCES

ENCYCLOPEDIA OF COMPLEMENTARY HEALTH PRACTICE. Springer Publishing Company, New York, NY, 1999. REF-DICT WB 13 E561

This encyclopedia serves as a bridge between complementary health care practices and traditional medicine. It is based on a health care approach rather than a medical one and uses terms consistent with complementary health care. This source is divided into four parts which include:

Contemporary Issues in Complementary Health Practices
Conditions
Influential Substances
Practices and Treatments

RACIAL AND ETHNIC DIVERSITY. New Strategist Publications, Inc., Ithaca, NY, 2000.
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This book profiles the salient characteristics of Asians, Blacks, Hispanics, Native Americans, and Whites in the United States. Much of the data is derived from the *Current Population Survey* and the 1990 census. While most of the data was collected from the U.S. government, individual tables were compiled and created by the publisher. Selections of tables include:

Education	Health
Households	Housing
Income	Labor Force
Population	Spending
Wealth	

PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
Youth Violence Anabolic Steroid Abuse Educating Providers of HIV/AIDS Care Hysterectomy Patient Education Materials for Physician Practices Quality of Life in the Mentally Ill Reinventing Government	489	August 2000
The West Nile Virus Delivery of Health Services to Adolescents Genetic Research in Schizophrenia Menopause Quality of Care Measures Based on Socioeconomic or Racial/Ethnic Factors Racial/Ethnic Minority Substance Abuse Reinventing Government	490	September 2000
Childhood Immunization Cognitive Behavior Therapy for Mental Disorders Congestive Heart Failure Health Insurance Coverage for New Genetic Technologies National Household Survey on Drug Abuse Organ Donation Reinventing Government	491	October 2000

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- Administration on Aging
- Agency for Healthcare Research
And Quality
- HHS Regional Offices
- Health Resources and Services
Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of the Secretary
- Office of Public Health and Science
- Program Support Center
- Substance Abuse and Mental Health
Services Administration

LIBRARY MISSION

The Parklawn Health Library, the NCHS Staff Research Library, and the Information Resources Center plan, develop, and administer a national research collection and innovative information programs in direct support of the Department of Health and Human Services.

LIBRARY COLLECTION

The Scope of the collection includes the delivery of health care, health administration, health policy, health services research, health promotion and disease prevention, computer sciences, management sciences, medical sociology, health statistics, international health, epidemiology, public health, mental health, psychiatry and neurology, and substance abuse.

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